Fulton County FY 2015/2016/2017 CDBG Application

PUBLIC IMPROVEMENTS AND FACILITIES APPLICATION (FOR ACQUISITION, CONSTRUCTION, FACILITY IMPROVEMENTS, HISTORIC PRESERVATION)

This page must be used as the cover page for your application. You may retype the page. Applications must be submitted in the outline form presented in order to be considered for funding.

Applicant Information	
Organization's Legal Name:	
Street Address/City/State/Zip:	
Executive Director:	
Designated Contact Person/Title:	
Telephone:	
Fax:	
E-Mail:	
Project Information	
Amount of CDBG Funding Requested:	FY 2015 \$
Applicant must obtain gap financing of 50% or more per each project/activity year.	FY 2016 \$ FY 2017 \$
Proposed Project Name:	
Proposed Project Street Address, City, Zip Code: _	

Fulton County FY 2015/2016/2017 CDBG Public Improvements and Facilities

Section I: Project Description

Please provide a narrative description of no more than two (2) pages (12 inch font size on $8\frac{1}{2}$ " x 11" paper) for the proposed project. Your narrative must include *but is not limited to* the following information:

- 1. What is the goal of this project?
- 2. What target population will be served by this project (specify youth, seniors, special needs, etc.)?
- 3. What objective documentation or research justifies the need for this project in Fulton County?
- 4. How does your project fit into a continuum of care for your target population?
- 5. Provide an implementation schedule detailing the major components of the project or program, the timing of each component and the projected drawdown dates. This information must be included as Attachment E to your application (see page 17). The County will award funding from each program year based on the ability of applicants to expend funds within each program fiscal year, which runs from January 1st thru December 31st of each year.
- 6. How does the project relate to your other submissions for this funding cycle, if any?
- 7. Describe the anticipated project outcomes. Complete the chart on the following page to describe the most significant outcome(s) this project is expected to have on its participants for year(s) 2015/2016/2017. Tell how many households or individuals will realize each outcome and how each outcome will be measured. Copy and complete the following chart, as needed, for each program year of your application.

Definitions:

Outcomes: Outcomes are not the products for the agency, but the benefits for the participants. What will be the benefits for the client? Why is the project being done? Examples of outcomes include the # of seniors remaining in their homes, # of evictions prevented, finding and maintaining a job or permanent housing, or having financial stability. Include only major project outcomes supported by the requested CDBG funds.

Major Tasks: Outline the major tasks/activities to be conducted by this project (e.g. client outreach/assessment; job training/placement; site preparation, pre-development, management, construction/rehabilitation; etc.)

Outputs: Quantifiable products of tasks, e.g. # housing units constructed/rehabilitated, # of people housed, # of jobs created or persons trained, # of homeless sheltered, etc.

Outcome #1 Describe how participants will benefit and how many are expected to realize this outcome.

Major Tasks Necessary to Realize Outcomes	Outputs Resulting from Tasks
Outcome Measurements: Describe evaluation tools outcome.	, methods and benchmarks to measure achievement of this

Outcome #2 Describe how participants will benefit and how many are expected to realize this outcome.

Major Tasks Necessary to Realize Outcomes	Outputs Resulting from Tasks
Outcome Measurements: Describe evaluation tools	s, methods and benchmarks to measure achievement of this
outcome.	

Section II: National Objective/Low- and Moderate-Income Benefit.

Pro	jects that 1	provide a	benefit to	low- and	moderate	-income	people	e can q	ualify	y as fo	ollows:

- 1. Area Benefit; or
- 2. Limited Clientele/Job Creation.

Refer to Section II of the accompanying Program Manual to determine which category best fits your project. Complete one section, either A or B, below. Data needed to complete Area Benefit questions may be found on page ix or in Appendix B of the Program Manual.

Α.	Area Benefit Project:	

1.	Indicate the Census tract(s) and Block Grou				
_	project/service is located?				
	How many residents live in this service area	a?	 _		
3.	What is the percentage of low- and moderat area?	te-income beneficia	aries in the service		
4. What documentation did you use to determine your answer to the above questions?					
	Census Data	Resident Surveys			
	If a survey was used, please attach complete included on page ix.	ed surveys. The sa	mple survey form is		
5.	List the anticipated characteristics of all ber	neficiaries who will	be served:		
5.	List the anticipated characteristics of all ber	neficiaries who will # to be Served	be served: # Hispanic		
5.	List the anticipated characteristics of all ber White				
5.	•				
5.	White				
5.	White Black/African American				
5.	White Black/African American Asian American Indian/Alaskan Native Native Hawaiian/Other Pacific Islander				
5.	White Black/African American Asian American Indian/Alaskan Native	# to be Served			
5.	White Black/African American Asian American Indian/Alaskan Native Native Hawaiian/Other Pacific Islander American Indian/Alaskan Native & White Asian & White	# to be Served	# Hispanic		
5.	White Black/African American Asian American Indian/Alaskan Native Native Hawaiian/Other Pacific Islander American Indian/Alaskan Native & White Asian & White Black/African American & White	# to be Served	# Hispanic		
5.	White Black/African American Asian American Indian/Alaskan Native Native Hawaiian/Other Pacific Islander American Indian/Alaskan Native & White Asian & White Black/African American & White Am. Indian/Alaskan Native &	# to be Served	# Hispanic		
5.	White Black/African American Asian American Indian/Alaskan Native Native Hawaiian/Other Pacific Islander American Indian/Alaskan Native & White Asian & White Black/African American & White	# to be Served	# Hispanic		

1. What is the annual unduplicated # of people to be served by the proposed project?

B.

2.	. Does the project primarily benefit a specialized population(s) such as:						
	Elderly (62 or older) Homeless Illiterate Adults						
	Describe how this project assists this	population:					
3.	Does the proposed project serve Incor Households (housing rehabilita assistance, etc.)?						
4.	What are the anticipated incomes of income limits. Report either by ind question #3 above.						
	# at 0 – 30% of median income # at 31% - 50% of median income # at 51% - 80% of median income						
5.	Based upon the information provide low- and moderate-income beneficia		anticipated percent of				
6.	What percentage of low- and moder female single-head of households with		ries is anticipated to be				
7.	List the anticipated characteristics of	all beneficiaries who	will be served:				
	White Black/African American Asian American Indian/Alaskan Native Native Hawaiian/Other Pacific Island American Indian/Alaskan Native & V Asian & White Black/African American & White Am. Indian/Alaskan Native & Black/African Am. Other Multi-Racial		# Hispanic				

${\bf Section~III:~Project~Development-Public~Improvement/Facility}$

This section is designed to help the County determine the readiness of the proposed project.

Α.	Genei	cal Considerations	1 7	Nic
	1.	Will the project require land acquisition? If yes: Has an appraisal been completed?	Yes —	No —
		Do you have a contract/option to purchase the property?		_
	2.	Will the project require the relocation of owners or tenants, either residential or commercial?		
		If yes, does the project budget include funds for relocation expenses?		_
В.	Site C	Control and Development		
	1.	Is the property owned by applicant? If yes, attach a copy of the deed.		_
		If no, is the property leased? If leased, attach a Copy of the lease and a letter of support for the		_
		proposed project from the property owner (Minimum of 99 years required for Leased Property).		
	2.	Will the project require easements? If yes, how many?		_
	3.	What is the current zoning of the proposed project?		
	4.	Is the proposed project consistent with current zoning?	_	
	5.	Is there a topographical survey for the area? If yes, please attach a copy.		
	6.	Has the agency obtained a property survey?		
C.	Proje	ct Design and Management		
	1.	Has the agency retained the services of a consultant? If ye below. (Note: CDBG funds cannot pay for costs associated with coif procurement for their services occurs prior to the approval Community Development Project Manager and upon execution of a CarchitectFinancial AnalystCivil EngineerEnvironmental/Soil EngineerLandscape ArchitectOther	nsultan of the	t contract e assigned Contract.) rney

2.	If the answer to #1 above was "no", how will the agency secure these services to manage the bidding, contracting, inspections and close-out of the project?
3.	Does the agency have architectural drawings and specifications? yes no
4.	Did the agency include a line item for lead-based paint abatement in the rehabilitation project budget? Refer to page 46 of the Program Manual for requirements related to lead-based paint. yes no
5.	Has the agency identified a developer, if applicable? yes no
	If yes, provide name and telephone number of developer.
6.	Will a review of the proposed project be required by: (Check all that apply.) Architectural Review Board Local Building Inspector/Department. Name local jurisdiction: State Department of Transportation County or Local Public Works County Board of Health Board of Zoning Appeals Community Zoning Board or Planning Commission Other (Specify)
7.	Is the agency aware of any other current or proposed projects, such as County, Federal, or State that may affect the timing of the project? yes no If yes, please list the project(s), estimated date(s) of construction, and agency (ies) responsible for the project.
8.	Provide an estimated annual operating budget for the proposed facility to be acquired, constructed or renovated. Explain how these operational funds will be provided to ensure continued operation of facility.
9.	Provide all letters of committed funding for pre or permanent construction of this project.
10.	Other information the agency wishes to provide regarding the status of the project:

Section IV: Environmental and Historical Preservation Considerations

1.	Please check the items below that, to the best of the Agency's knowledge, apply to the proposed project.
	The project:
	 is located within 15 miles of an airport. is located within 100 to 3000 feet of a railroad or public transportation track. is located on a State or County road. Name the road requires rezoning or a special permit. structure was constructed prior to 1978. structure is located on a heavily traveled street within 1000 feet from the centerline or median
2.	Please indicate the year that the structure to be acquired/rehabilitated was constructed and identify the source of the information.
3.	What is the current use of the property where the proposed project will be located?
1.	What was the previous use of the property where the proposed project will be located?

Section V: Budget Please complete the project budgets for year 2015, 2016, and 2017 requests. Consider potential cost increases in the preparation of budgets, particularly for FY 2016 and 2017. Applicant must obtain gap financing of 50% or more per each project/activity year.

A. FY 2015 Budget

List all Line Items Included in the Project Budget	A. Timetable for each Phase	B. Fulton County CDBG Funds Requested from FY 2015	C. Other Source(s) of Project Funding	D. Total (B + C)
Preconstruction Cost	s (list by compo	nent)		
Acquisition				
Demolition				
Relocation				
Architectural				
Services				
Insurance/Bonding*				
Construction				
Management				
Audit**				
Other (Specify)				
Total Precons	struction Costs			
Construction Costs (list by compone	nt)		<u> </u>
Total Cons	struction Costs			
Tota	al Project Cost			

^{*} Note that General Liability Insurance (\$1 million); Automobile Liability Insurance, if appropriate; and Fidelity Bond (100% of contract amount) are usually required for all contractors. Costs for coverage should be included in this budget summary. If the agency does not already have this coverage, this is an eligible CDBG expense.

- ** All projects funded with CDBG funds must have an annual independent audit. Agencies with total annual federal or federally-derived funding of \$300,000 or more must have an annual A-133 audit. The cost of conducting this audit is an eligible CDBG expense.
- 1. Include commitment letters specifically for this project from other funding sources as Attachment D (refer to page 17). If there are not sufficient funding commitments to ensure completion of the project your application may not be funded.
- 2. If agency is using a cost estimate for a construction project, please attach a copy of the cost estimate, and the name and telephone number of the person who prepared the cost estimate.
- 3. Based on the budget above, what is the cost per beneficiary for the proposed project? (Refer to your answer to Section II, B (1) of this application for the anticipated number of beneficiaries, and explain how the cost per beneficiary was calculated.)

B. FY 2016 Budget

List all Line Items Included in the Project Budget	A. Timetable for each Phase	B. Fulton County CDBG Funds Requested from FY 2016	C. Other Source(s) of Project Funding	D. Total (B + C)
Preconstruction Cost	s (list by compo	nent)		
Acquisition				
Demolition				
Relocation				
Architectural				
Services				
Insurance/Bonding*				
Construction				
Management				
Audit**				
Other (Specify)				
Total Precons	truction Costs			
Construction Costs (list by compone	nt)		
Total Cons	struction Costs			
Tota	al Project Cost			

^{*} Note that General Liability Insurance (\$1 million); Automobile Liability Insurance, if appropriate; and Fidelity Bond (100% of contract amount) are usually required for all contractors. Costs for coverage should be included in this budget summary. If the agency does not already have this coverage, this is an eligible CDBG expense.

^{**} All projects funded with CDBG funds must have an annual independent audit. Agencies with total annual federal or federally-derived funding of \$300,000 or more must have an annual A-133 audit. The cost of conducting this audit is an eligible CDBG expense.

^{1.} Include commitment letters specifically for this project from other funding sources as Attachment D (refer to page 17). If there are not sufficient funding commitments to ensure completion of the project your application may not be funded.

- 2. If agency is using a cost estimate for a construction project, please attach a copy of the cost estimate, and the name and telephone number of the person who prepared the cost estimate.
- 3. Based on the budget above, what is the cost per beneficiary for the proposed project? (Refer to your answer to Section II, B (1) of this application for the anticipated number of beneficiaries, and explain how the cost per beneficiary was calculated.)

B. FY 2017 Budget

List all Line Items Included in the Project Budget	A. Timetable for each Phase	B. Fulton County CDBG Funds Requested from FY 2017	C. Other Source(s) of Project Funding	D. Total (B + C)	
Preconstruction Costs (list by component)					
Acquisition					
Demolition					
Relocation					
Architectural					
Services					
Insurance/Bonding*					
Construction					
Management					
Audit**					
Other (Specify)					
Total Precons	struction Costs				
Construction Costs (list by componer	nt)			
Total Cons	Total Construction Costs				
Total Project Cost					

^{*} Note that General Liability Insurance (\$1 million); Automobile Liability Insurance, if appropriate; and Fidelity Bond (100% of contract amount) are usually required for all contractors. Costs for coverage should be included in this budget summary. If the agency does not already have this coverage, this is an eligible CDBG expense.

^{**} All projects funded with CDBG funds must have an annual independent audit. Agencies with total annual federal or federally-derived funding of \$300,000 or more must have an annual A-133 audit. The cost of conducting this audit is an eligible CDBG expense.

- 1. Include commitment letters specifically for this project from other funding sources as Attachment D (refer to page 17). If there are not sufficient funding commitments to ensure completion of the project your application may not be funded.
- 2. If agency is using a cost estimate for a construction project, please attach a copy of the cost estimate, and the name and telephone number of the person who prepared the cost estimate.
- 3. Based on the budget above, what is the cost per beneficiary for the proposed project? (Refer to your answer to Section II, B (1) of this application for the anticipated number of beneficiaries, and explain how the cost per beneficiary was calculated.)

C. Budget Summary of Requested CDBG Project/Activity

Amount requested from Fulton	FY 2015	<u>%</u>	FY 2016	<u>%</u>	FY 2017	<u>%</u>
Amount requested from Fulton County CDBG Program:	\$		\$	_	\$	
Amount Committed from other Sources (Attach Commitment Documentation as Attachment D):	\$		\$	_	\$	
Amount requested from other Sources not yet committed (Excluding CDBG & Agency):	\$		\$		\$	
Amount of Agency Contributions:	\$		\$		\$	
TOTAL PROJECT COST:	\$		\$		\$	

Section VI: Comprehensive Plan/ Mission/Compliance

For all Municipal Applicants:

Α.

This section does not apply to **Fulton County Departments** applying for funding as the Community Development Division has direct access to the requested information.

		• • •
	1.	Is the proposed project consistent with the City's comprehensive plan? Yes No
		Briefly explain how the proposed project is or is not consistent with the municipal comprehensive plan.
	2.	If the applying municipality has a Neighborhood Revitalization Strategy Area (NRSA) approved by HUD, is this project located within that NRSA? Yes No
	3.	If yes, is the project consistent with the Strategy? YesNoN/A
		Briefly explain how the proposed project is or is not consistent with the Neighborhood Revitalization Strategy.
В.	3. For Non-Profit Applicants:	
	1.	Is the proposed project consistent with the Agency's Mission Statement? YesNo
		Briefly explain how the proposed project is or is not consistent with the Agency's Mission Statement.

Section VII: Citizen Participation

This section does not apply to **Fulton County Departments** applying for funding as the Community Development Division has direct access to the requested information.

An important aspect of the CDBG Program is citizen participation. Each application must include documentation indicating that citizens of the community in which the project/service is located, have been informed of the project. This participation may be accomplished by conducting community meetings or public hearings where citizens are invited to comment on proposed projects. In addition, official notification must be conducted as follows:

A. For Municipalities:

The municipal council members must be notified at a public council meeting of the intent of the municipality to submit an application for funding. Adequate advance notice of the date of the meeting must be given to the public (in accordance with State of Georgia Open Meetings Act requirements). The following documentation of the notice and discussion of the meeting must be included in the application:

- 1. A copy of the public notice with date of publication;
- 2 The agenda for the meeting with project listed;
- 3. Minutes of the meeting where the application was discussed;
- 4. Optional; Newspaper clippings regarding the meeting at which the project was discussed; letters of support received by the municipality; and
- 5. A copy of the resolution from the City Council endorsing the submission of the project application; stating the project/service to be funded; the amount of the CDBG request in the application; and stating the amount to be contributed by the municipality for the project.

B. For Non-Profit Organizations:

Each application from a non-profit organization must contain a resolution from the organization's Board of Directors endorsing the submission of the application. The resolution must include the following:

- 1. A statement from the Board stating the project to be funded;
- 2. The amount of the CDBG funds requested in the application; and
- 3. A statement of the amount to be contributed by the organization.

Section VIII: CDBG Application Submission Requirements

information is included as requested and labeled. Incomplete applications or applications that do not follow the prescribed format will not be considered for funding. One original and two copies of the entire application submission with original signatures, formatted and organized as required. Attachment A: Area benefit map indicating service area for CDBG funded activities Attachment B: Most recent financial audit. Not applicable for Fulton County Departments applying for funding. Attachment C: Endorsing Resolution (including citizen participation documentation for municipal applications). Not applicable for Fulton County Departments applying for funding. Attachment D: Commitment letters from other funding sources documenting other funds to be used for the project covered by the County's CDBG funds. **Attachment E:** An implementation and expenditure schedule for years 2015, 2016, and 2017 funding requests. The following items are also required for non-profit application submittals. Please make sure all attachments are labeled. Not applicable for Fulton County Departments applying for funding. Attachment F: List of the active advisory council members or members of the agency's board of directors. **Attachment G:** Certificate of IRS 501(c) (3) tax exempt status. **Attachment H:** Articles of Incorporation and By-Laws. Attachment J: Organizational chart. **Attachment K:** Information documenting the agency's operating budget. Attachment L: Optional letters of community support for the project to be

The following items must be submitted with the CDBG application. Please ensure that all

The following items should be submitted if applicable to your application. Please **only submit if appropriate.** Please label all attachments.

Low/Mod income survey forms
Topographical survey
Deed/lease for premises
Site plan/schematic design.
Cost estimate for construction

undertaken by the agency.

CDBG 2015/2016/2017 Application Certification

I certify that the application submitted for Fulton County CDBG funds is accurate and complete to the best of my knowledge and belief. And if CDBG funds are awarded for the activities presented in this application, I will comply with the necessary certifications and assurances required by Fulton County and HUD.

Name of Organization

E-mail

Name of Organization	E-mail		
Signature of Authorizing Official	Date		
Name of Authorizing Official (please type)	Phone Number		
Address	Fax Number		
City/State/Zip	E-mail (contact person)		

Conflict of Interest 24 CFR Part §570.611

(a) Applicability.

- (i) In the procurement of supplies, equipment, construction, and services by recipients and by subrecipients, the conflict of interest provisions in 24 CFR 85.36 and 24 CFR 84.42, respectively, shall apply.
- (ii) In all cases not governed by 24 CFR 85.36 and 84.42, the provisions of this section shall apply. Such cases include the acquisition and disposition of real property and the provision of assistance by the recipient or by its subrecipients to individuals, businesses, and other private entities under eligible activities that authorize such assistance (e.g., rehabilitation, preservation, and other improvements of private properties entities pursuant to 570.203, 570.204, 570.455, or 570.703(i)).
- (b) Conflicts Prohibited. The general rule is that no persons described in paragraph (c) of this section who exercise or have exercised any functions or responsibilities with respect to CDBG activities assisted under this part, or who are in a position to participate in a decision making process or gain inside information with regard to such activities, may obtain a financial interest or benefit from a CDBG-assisted activity, or have a financial interest in any contract, subcontract, or agreement with respect to a CDBG-assisted activity, or with respect to the proceeds of the CDBG-assisted activity, either for themselves or those with whom they have business (Partner, share holder, or vested percentage) or immediate family ties (relatives such as first-cousins), during their tenure or for one year thereafter.
- (c) Persons covered. The conflict of interest provisions of paragraph (b) of this section apply to <u>any</u> person who is an employee, agent, consultant, officer, or elected official or appointed official of the recipient (Fulton County), or any designated public agencies, or of subrecipients (recipients of Fulton County) that are receiving funds under this part.
- (d) *Exceptions*. Upon the written request of the recipient, HUD may grant an exception to the provisions of paragraph (b) of this section on a case-by-case basis when it has satisfactorily met the threshold requirements of (d)(1) of this section, taking into account the cumulative effects of paragraph (d)(2) of this section.
 - (1) Threshold requirements. HUD will consider an exception only after the recipient has provided the following documentation;
 - (i) A disclosure of the nature of the conflict, accompanied by an assurance that there has been public disclosure was made; and
 - (ii) An opinion of the recipient's attorney that the interest for which the exception is sought would not violate State or local law.
 - (2) Factors to be considered for exceptions. In determining whether to grant a requested exception after the recipient has satisfactorily met the requirements of paragraph (d)(1) of this section, HUD shall conclude that such an exception will serve to further the purposes of the Act and the effective and efficient administration of the recipient's program or project, taking into account the cumulative effect of the following factors, as applicable:

Conflict of Interest 24 CFR Part §570.611

(Continued)

- (i) Whether the exception would provide a significant cost benefit or an essential degree of expertise to the program or project that would otherwise not be available;
- (ii) Whether an opportunity was provided for open competitive bidding or negotiation;
- (iii) Whether the person affected is a member of a group or class of low- or moderateincome persons intended to be the beneficiaries of the assisted activity, and the exception will permit such person to receive generally the same interests or benefits as are being made available or provided to the group or class;
- (iv) Whether the affected person has withdrawn from his or her functions or responsibilities, or the decision-making process with respect to the specific assisted activity in question;
- (v) Whether the interest or benefit was present before the affected person was in a position as described in paragraph (b) of this section;
- (vi) Whether undue hardship will result either to the recipient or the person affected when weighed against the public interest served by avoiding the prohibited conflict; and
- (vii) Any other relevant considerations.

NON CONFLICT OF INTEREST CERTIFICATION

I certify the applicant is complying with the conflict of interest provision of 24 CFR part 570.611.

The applicant hereby further understands and agrees that in the event that such conflict of interest is determined to exist, applicants' application may be rejected. The applicant may be required to return any CDBG funds previously awarded by Fulton County.

Applicant's Printed Name	
Applicant's Signature	Date

The Fulton County Department of Housing and Community Development is committed to making the Community Development Block Grant Program application process effective and user friendly for applicants. Please utilize this page to provide your comments on the application form, the Program Manual and the technical assistance provided to you during the application submission process. Your comments will help us continue to improve our application process.

COMMENTS